

Life Opportunities Trust

Firs and Hewlitt

Inspection report

The Firs and Hewlitt
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Date of inspection visit:
16 November 2020

Date of publication:
11 December 2020

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

About the service

Firs and Hewlitt is a care home providing accommodation in two buildings for up to 13 people with a learning disability or autism, including older people, some of whom are living with dementia and/or a physical disability. At the time of the inspection there were seven people living in the 'Firs' part of the home and six people living in the 'Hewlitt' part of the home.

People's experience of using this service and what we found

People told us they liked living at the service, they felt safe and staff were kind. Relatives also told us this. On arrival people were comfortable and being supported by staff appropriately.

Incident, events and unexplained injuries were recorded and investigated. Where needed, incidents were reported appropriately.

Medicines were managed safely, and staff supported people in way that met their needs and reflected their choices.

Training relating to infection control and COVID-19 had been delivered. There was a risk assessment and management plan in relation to COVID-19. Staff knew what was needed to reduce the risk of infection. However, we did note at times staff pulled their masks down to get air and the bin was not near the door for disposal of personal protective equipment (PPE) on leaving the building. The placement of the bin was immediately rectified to ensure staff did not walk through the building without a mask on.

The environment needed to be refurbished. There was a refurbishment plan in place, but this had not been completed due to delays caused by the pandemic. The manager and the provider were aware of the improvements that were required and were focused on making those improvements.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the guidance CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

People told us that they were treated respectfully by staff and were able to choose how to spend their days.

We saw staff offer choices and listen to people's responses before supporting them and explain what they were doing. Although the environment needed refurbishment to make it more pleasant for people, staff behaviour made it feel homely and people were able to move around freely. For one person who spent time on their bedroom floor, staff put shoe covers on before entering to help protect their space from dirt and germs. Staff responded to changes in needs or health to help people feel better and get what they needed. Relatives also felt the staff were kind, supportive, friendly and supportive.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 28 March 2019).

Why we inspected

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We undertook this targeted inspection to look at the specific concerns about the safety and welfare of people which we had received about the service. The concerns related to poor treatment of a person with complex needs, poor management of pressure care and false recording of fluids. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from these concerns.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

Please see the safe section of this full report. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Firs and Hewlitt on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question Requires Improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Firs and Hewlitt

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to follow up on specific concerns we had received about people's safety and welfare. We will assess all of the key question at the next comprehensive inspection of the service.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was undertaken by two inspectors.

Service and service type

Firs and Hewlitt is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager who was applying to be registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave notice at the door on arrival so we could clarify the services COVID-19 Personal Protective Equipment (PPE) practice for visiting professionals and identify persons who were shielding so we could respond accordingly.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We did not request a provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our

inspections. We used all of this information to plan our inspection. We had requested information from the provider prior to the inspection and this information was used as part of the inspection plan.

During the inspection

We spoke with four people who used the service and received feedback from five relatives about their experience of the care provided. We spoke with four members of staff, the manager and the care services director. We also contacted the local authority for their feedback. We looked at records relating to people's care.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to explore the specific concerns we had about Firs and Hewlitt. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and liked the staff. We saw staff support people in a kind and patient way.
- Relatives told us that they felt people were safe. One relative said, "[Person] has said that they feel safer here, it is a combination of everything, including being with others." Another relative said, "Very kind, excellent staff. Very, very loving and a family atmosphere."
- Where people needed to have additional support in place to promote their safety, this was well documented and gave clear instructions to staff.
- Staff knew what abuse might look like and knew how to raise and report concerns.
- Staff told us they had not witnessed anything that looked like abuse and would not tolerate it if they did.
- People looked clean and comfortable. There were no obvious injuries on people and no recent reports of injuries.
- Records showed how people spent their days and staff feedback supported these records.
- Systems were in place to record unexplained injuries or incidents and a member of the management team completed an investigation. Safeguarding incidents were reported to us when needed and to the local authority safeguarding team.

Preventing and controlling infection

How well are people protected by the prevention and control of infection?

- Staff were aware of the control measures needed to reduce the risk of COVID-19 coming into the home. They had received training and cleaning regimes were in place. However, we noted that at times staff had their masks below their nose or on their chin while in the building and one staff member had their mask on their chin while walking with a person outside. We also found that staff and visitors in the Firs part of the home needed to remove their PPE while in the bathroom in the middle of the building as there was no bin by the exit. We raised this on the visit and it was rectified.

We recommend that there are robust checks in place to ensure staff are always wearing their masks appropriately at all times.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.

- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Using medicines safely

- We checked a random sample of medicines that were prescribed to alter people's moods and reduce behaviour that may challenge.
- We found that medicines were signed as being given in accordance with the prescriber's instructions and quantities checked supported this.

Assessing risk, safety monitoring and management

- People had individual risk assessments and support plans were in place to guide staff. Staff knew people well and told us how to support people safely.
- Relatives felt staff supported people safely. One relative said, "[Person] has severe needs and needs a fair bit of attention after [an injury] at another place. They did everything they could, constantly monitoring, got them a special bed and wheelchair, never any concerns."
- Staff responded to changing needs. They were aware of who was at risk of developing a pressure ulcer or not eating and drink enough. Staff were knowledgeable about how they supported people in these areas. There were plans in place to manage these areas of increased risk. Records checked supported staff feedback about care being delivered.
- The home was visited by health professionals when needed to help ensure people received safe support. This included district nurses and dietician. They had not identified any concerns.